

2011 Fall Softball Registration Form

Entry fee must accompany this form. **New: The City of Saint Paul no longer accepts personal checks.** You may register in person, by mail, by phone, or by internet with a credit/debit card (651-558-2255).

Municipal Athletics. 1500 Rice St.. St. Paul. MN 55117

Amount Paid _____

Receipt # _____

Date Received _____

(Office use only)

Team Name _____ Managers Name _____

Address _____ City _____ Zip _____

Day Phone () _____ Eve Phone () _____ Cell Phone () _____

E-Mail _____

Division of play	Men's Slow	Men's Fast Pitch	Women's Slow	Co Rec Slow
Day of Play (Please circle)	Monday D R/A (double)	Monday Dunning	Wednesday D R/A	Sunday B/C R/A
	Tuesday D R/A	Thursday Dunning	Thursday D R/A	Sunday D R/A
	Tuesday D R/A (double)			Tuesday D/E Dunn
	Wednesday D R/A			Wednesday D/E Dunn
	Wednesday C/D R/A (double)			Friday D R/A
	Thursday D R/A			
	Thursday C/D R/A (double)			
	Friday D R/A (double)			

Are you a returning **FALL** team from last year? Yes No

If yes - what field and night did you play **FALL** at last year? Night _____ Field _____

Comments _____

I have read the enclosed conduct policy and will relay it to my team. I will be responsible for the conduct of my team.

Manager/Team Representative

AA-ADA-EEO Employer